



DISCLOSURE 2B – INDIVIDUAL: INTERESTS OF PUBLIC OFFICIALS

Refer to the Application Instruction Booklet for instructions on how to complete this form at: www.michigan.gov/mmfl

Individual's Name _____

Please list the names and titles of all public officials or officers of any unit of government as well as the spouses, parents, and children of those public officials or officers, who, directly or indirectly:

1. Are the creditors of the individual.
2. Hold any debt instrument issued by the individual.
3. Hold or have any interest in any contractual or service relationship with the individual.

Name of Public Official/Officer of Governmental Unit

Title

Is the interest that of the public official or officer of a governmental unit? ☐ Yes ☐ No

If **yes**, state the percentage/capacity of interest _____

If **no**, provide the following information about the interest of the family member of the public official or officer:

Name of Family Member

Relationship

Date of Birth

Address

Percentage/Capacity of Interest

SSN

Name of Family Member

Relationship

Date of Birth

Address

Percentage/Capacity of Interest

SSN

Name of Family Member

Relationship

Date of Birth

Address

Percentage/Capacity of Interest

SSN

NOTE: The Marijuana Regulatory Agency may require additional individuals to submit personal disclosure forms based on information contained in this application or otherwise disclosed during the background investigation.